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DEC 28 2022

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER		2. DATE
Black Hills Pioneer		9.20.22
3. FREQUENCY OF ISSUE	3A. NO. OF ISSUES PUBLISHED ANNUALLY	3B. ANNUAL SUBSCRIPTION PRICE \$
Daily	306	Various
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)		
PO Box 7 Spearfish, Lawrence County, SD 57783		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)		
PO Box 788 Hastings, NE 68901		
6. FULL NAME OF PUBLISHER:		
Letha Lister		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME		COMPLETE MAILING ADDRESS
Seaton Publishing CO Inc.		PO Box 7 Spearfish SD 57783
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)		
None		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	4499	4442
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	3414	3421
2. Mail Subscription (Paid and or requested)	374	388
3. Paid Electronic Copies	449	449
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	4237	4258
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	0	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	95	95
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	4332	4353
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	91	45
2. Return from News Agents	76	44
G. TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	4499	4442

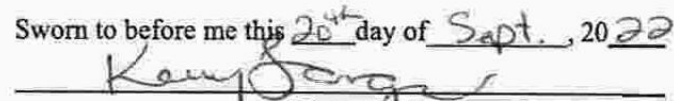
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:


(Signature)

Publisher
(Title)

State of South Dakota)
County of Lawrence)

(Seal)

Sworn to before me this 20th day of Sept., 2022

Notary Public

My commission expires: 7-18-2025